

Early Learning Advisory Council (ELAC)

Birth to Three Subcommittee

Meeting Agenda

Friday, December 18 from 11:00am to 12:00pm

Birth to Three System Design

- What are your initial reactions, ideas or suggestions?
- What are the most impactful questions to focus on that will help achieve the project goal and purpose?
- Who else should we work with to address the project questions?

Discussion	<p>General Questions</p> <ul style="list-style-type: none"> There was conversation about the 2020 timeframe for the goal and the context of school readiness. Ross Hunter and DEL are approaching this as an aggressive goal that is necessary in order to mobilize the resources to reach the goal. School readiness refers to child outcomes from a whole child, whole family, whole community framework using indicators such as WaKIDS. This process will help prepare budget and legislative requests for the coming biennium. Evette provided an overview of the project outline document, then went through and described each section of this rough draft and opened the floor for comments <ul style="list-style-type: none"> There was conversation about applying this plan to all children because the children needing interventions are not always easy to identify. We know that the earlier the intervention, the easier and more effective the results. If we are looking at all children, some will rise to the top of needing more services. A one door policy should be the goal in whatever system we come up with, because may not be easy to identify the exact intervention necessary at first. Therefore, we need families to have access to entry into the system that then has the opportunity for them to get the interventions they need. Current Context and Baseline Data <ul style="list-style-type: none"> There was encouragement to include infants and toddlers with mental health needs in the context and baseline data. DEL is having conversations about all kids vs. targeted kids. As DEL builds its internal research division, we are looking for the advice and expertise of others so that we are doing this work with the community. We will be sending questions out to you all. There was conversation about finding all children through the health care system and Medicaid. If you start by looking at all of the kids through primary care, you may prevent some of the mental health issues, and there could be fewer kids in need of interventions down the line. There was a caution to be sure that the 90% by 2020 goal timeline does not lead to focusing on kids who are closer to the school age and ignoring babies. Birth to Three System Design <ul style="list-style-type: none"> There was discussion regarding access and connection on several levels. First, connecting children and families to the system to determine what they need, and then having ways to connect them to the interventions or resources that are identified. How can we look at it like a continuum for more sustainability?
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	<ul style="list-style-type: none"> ○ We know that we don't currently have what's appropriate for the unique and diverse needs of families, so innovation is necessary. • Approach and Guiding Principles <ul style="list-style-type: none"> ○ There was a request to specifically name health care providers as part of the community that impacts and interacts with children. ○ There was mention that universal approaches are key. This includes comprehensive services in supporting families at the community level, and leveraging funds, not only in the birth-to-three realm but beyond. ○ It is important to note that services are to enhance rather than duplicate programs already in progress. ○ There was discussion about ensuring that the broader cultural and tribal communities and the specific cultural context of those communities are considered. • Project Participants <ul style="list-style-type: none"> ○ The role of the Subject Matter Experts (SME) is to connect with DEL individually to provide information and advice. Because of the short timeline, these individuals may not have time to meet all together as a group before May. We will be reaching out individually, and experts are invited to contact us with input. ○ Advisory Groups include this subcommittee. We are planning an in person meeting in April to seek input before any recommendations are submitted. ○ Greg Endler, Child Mental Health at Division of Behavioral Health and Recovery (DBHR) ○ It is important to include someone from DEL licensing. • Resources <ul style="list-style-type: none"> ○ Help Me Grow-WA, especially around data system overlaps ○ Baby Steps program—as an example of innovative program ○ Looping in Birth-Three grants from Thrive ○ American Indian Health Commission report from 2013 ○ Best Starts for Kids—King County ○ Washington Chapter of AAP (American Academy of Pediatrics) <ul style="list-style-type: none"> ▪ Measurement of children's access to interventions ○ Early Head Start data—WA and national, Early Head Start Child Care partnership initiatives, working on a new pilot—supporting children, family, providers ○ Frontiers on Innovation of Washington innovation clusters • Timeline <ul style="list-style-type: none"> ○ Please send baseline data and context to slc@del.wa.gov by early January 2016
Next Steps	Send additional input, feedback and ideas to slc@del.wa.gov

Next Meeting:

In person meeting in April 2016

*We will cancel invitations that have already been set, stay tuned for April meeting invitation.

Participants: Liv Woodstrom, Anne Messerly, Enrica Hampton, Candy Watkins, Sandra Szambelan, Zam Zam Mohamed, Nina Auerbach, Janelle Bersch, Kathy TeKolste, Jill Sells, Bridget Igoe, Suzanne Boursaw, Danette Glassy, Jason Gortney, Maria Vasquez, Jodi Wall, Christy Arenson, Jan Olmstead, Kelli Bohanon, Adrienne Dorf, Susan Franck, Roxanne Garzon, Travis Hansen, Caitlin Jensen, Deanna Stewart, Ashley Palar, Judy King, Veronica Santangelo, Greg Williamson, Evette Jasper